



PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

12

Application Number

09/644,587

Filing Date

8/23/2000

First Named Inventor

Eric Schneider

Art Unit

2155

Examiner Name

Benjamin Bruckart

Attorney Docket Number

**ENCLOSURES (Check all that apply)**

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/<br>Incomplete Application<br><input type="checkbox"/> Response to Missing Parts<br>under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a<br>Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance communication<br>to Technology Center (TC)<br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC<br>(Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosure(s) (please<br>Identify below): |
|--|--|--|

Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**Firm  
or  
Individual name

Eric Schneider

Signature

Date

9/22/2004

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name

Eric Schneider

Signature

Date

9/22/2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PTO/SB/17 (2/98)

Approved for use through 9/30/2000. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FEE TRANSMITTAL**

Patent fees are subject to annual revision on October 1.  
These are the fees effective November 10, 1998.  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.  
See 37 C.F.R. §§ 1.27 and 1.28.

**TOTAL AMOUNT OF PAYMENT** (\$) **55.00****Complete if Known**

Application Number	09/644,587
Filing Date	8/23/2000
First Named Inventor	Eric Schneider
Examiner Name	Benjamin Bruckart
Group / Art Unit	2155
Attorney Docket No.	

**METHOD OF PAYMENT (check one)**

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number   
Deposit Account Name

- ☐ Charge Any Additional Fee Required Under 37 C.F.R. §§ 1.16 and 1.17  
☐ Charge the Issue Fee Set in 37 C.F.R. § 1.18 at the Mailing of the Notice of Allowance

2. ☒ **Payment Enclosed:**  
☒ Check ☐ Money Order ☐ Other

**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 690	201 345	Utility filing fee	<input type="text"/>
106 310	206 155	Design filing fee	<input type="text"/>
107 480	207 240	Plant filing fee	<input type="text"/>
108 690	208 345	Reissue filing fee	<input type="text"/>
114 150	214 75	Provisional filing fee	<input type="text"/>

**SUBTOTAL (1)** (\$)**2. EXTRA CLAIM FEES**

	Extra Claims	Fee from below	Fee Paid
Total Claims <input type="text"/>	-20** = <input type="text"/>	X <input type="text"/>	= <input type="text"/>
Independent Claims <input type="text"/>	-3** = <input type="text"/>	X <input type="text"/>	= <input type="text"/>
Multiple Dependent			

\*\*or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 78	202 39	Independent claims in excess of 3
104 260	204 130	Multiple dependent claim, if not paid
109 78	209 39	** Reissue independent claims over original patent
110 18	210 9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)** (\$)**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	<input type="text"/>
127 50	227 25	Surcharge - late provisional filing fee or cover sheet.	<input type="text"/>
139 130	139 130	Non-English specification	<input type="text"/>
147 2,520	147 2,520	For filing a request for reexamination	<input type="text"/>
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	<input type="text"/>
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	<input type="text"/>
115 110	215 55	Extension for reply within first month	55
116 380	216 190	Extension for reply within second month	<input type="text"/>
117 870	217 435	Extension for reply within third month	<input type="text"/>
118 1,360	218 680	Extension for reply within fourth month	<input type="text"/>
128 1,850	228 925	Extension for reply within fifth month	<input type="text"/>
119 300	219 150	Notice of Appeal	<input type="text"/>
120 300	220 150	Filing a brief in support of an appeal	<input type="text"/>
121 260	221 130	Request for oral hearing	<input type="text"/>
138 1,510	138 1,510	Petition to institute a public use proceeding	<input type="text"/>
140 110	240 55	Petition to revive - unavoidable	<input type="text"/>
141 1,210	241 605	Petition to revive - unintentional	<input type="text"/>
142 1,210	242 605	Utility issue fee (or reissue)	<input type="text"/>
143 430	243 215	Design issue fee	<input type="text"/>
144 580	244 290	Plant issue fee	<input type="text"/>
122 130	122 130	Petitions to the Commissioner	<input type="text"/>
123 50	123 50	Petitions related to provisional applications	<input type="text"/>
126 240	126 240	Submission of Information Disclosure Stmt	<input type="text"/>
581 40	581 40	Recording each patent assignment per property (times number of properties)	<input type="text"/>
146 760	246 380	Filing a submission after final rejection (37 CFR 1.129(a))	<input type="text"/>
149 760	249 380	For each additional invention to be examined (37 CFR 1.129(b))	<input type="text"/>

Other fee (specify) Other fee (specify) 

\* Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** (\$) **55.00****SUBMITTED BY**Typed or Printed Name **Eric Schneider**

Signature

Date

9/22/2004

**Complete (if applicable)**Reg. Number Deposit Account User ID 

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.